

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. \_\_\_\_\_

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH AND ADDICTION SERVICES  
BUREAU OF HEALTH SYSTEM REGULATION  
DIVISION OF MEDICAL QUALITY ASSURANCE

In re: Suzanne M. Choate, L.P.N.  
2 Deer Run  
Oakdale, CT 06370

Petition No. 931020-11-041

CONSENT ORDER

WHEREAS, Suzanne Choate of Oakdale, Connecticut (hereinafter "respondent") has been issued license number 010245 to practice as a licensed practical nurse by the Department of Public Health and Addiction Services (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent hereby admits and acknowledges that:

1. During August and September of 1993, while working as a nurse at Pendleton Nursing Home in Mystic, Connecticut, she diverted Ativan (Lorazepam) and Xanax (Alprazolam) from patient stocks to her own use.
  - (a) She generally took patient medication for her own use approximately once per shift, once or twice per week;
  - (b) She took at least some of the medication diverted while she was working;
  - (c) She falsified patient medication administration records to cover up her diversions.
2. She abused and/or utilized to excess the controlled substances Ativan and/or Xanax.

3. The conduct described in paragraphs 1 and 2 above fails to conform to the accepted standards of the nursing profession in violation of §20-99(b) of the General Statutes of Connecticut.
4. Respondent is licensed as a nurse only in Connecticut and does not have licensure pending in any other state.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, Suzanne Choate, L.P.N. hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations pertaining to her licensure.
3. Respondent's license number 010245 to practice as a licensed practical nurse in the State of Connecticut is hereby placed on probation for three (3) years, subject to the following terms and conditions:
  - A. She shall engage in counseling at her own expense with a licensed or certified therapist.
    - (1) She shall provide a copy of this Consent Order to her therapist.
    - (2) Her therapist shall furnish written confirmation to the Department and the Board of his or her engagement in that capacity and receipt of a copy of this Consent Order within fifteen (15) days of the effective date of this Consent Order.

(3) If respondent's therapist determines that therapy is no longer therapeutically necessary, he or she shall advise the Department and the Board, and the Department and the Board shall pre-approve said termination of therapy. However, the therapist or another licensed or certified therapist approved by the Department and the Board shall continue to monitor respondent's alcohol and drug free status by monitoring and reviewing the random urine screens for drugs and alcohol as described in paragraph 3E below, and by providing the reports described in paragraph 3B below.

(4) The therapist(s) providing services to respondent under the terms of paragraph 3A(2) or 3A(3) above shall immediately notify the Department and the Board in writing if respondent discontinues therapy and/or terminates his or her services.

B. She shall be responsible for the provision of written reports from her therapist directly to the Board monthly for the first year of her probationary period, and bi-monthly for the second and third years of probation. Such reports shall include documentation of dates of treatment, an evaluation of her progress in treatment and of her drug and alcohol free status as established by the random urine screens for drugs and alcohol described in paragraph 3E below, an evaluation of her ability to safely and competently practice nursing, and copies of all laboratory reports.

- C. Notwithstanding the foregoing, respondent's therapist shall immediately report to the Board any confirmed positive urine screen and any conduct or condition on respondent's part which does or may violate any federal or state law or regulation applicable to her profession.
- D. She shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate therapeutic purpose by a licensed health care professional.
- E. At her own expense, she shall submit to random witnessed urine screens for drugs and alcohol as ordered by her therapist and/or personal physician. She shall also be responsible for providing laboratory reports reporting the results of such screens directly to her therapist. All such random drug and alcohol screens and laboratory reports shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process.
- (1) She shall be responsible for notifying the laboratory, her therapist and the Board of any drug(s) she is taking.
  - (2) There must be at least one random drug and alcohol screen and accompanying laboratory report weekly for the first year of probation, at least one such screen and report every two weeks for the second year, and at least one such screen and report monthly for the third year of probation.

- (3) All screens shall be negative for drugs and alcohol.
- (4) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer testing.
- (5) Respondent is hereby advised that the ingestion of poppy seeds has, from time to time, been raised as a defense to positive screen results for morphine and/or opiates. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances during the term of this Consent Order. In the event respondent has a positive screen for morphine and/or opiates, respondent agrees that the ingestion of poppy seeds shall not constitute a defense to such a screen.

- F. Respondent shall not accept employment as a nurse for a personnel provider, visiting nurse agency or home health care agency for the period of her probation.
- G. Respondent shall provide a copy of this Consent Order to all current and future employers for the duration of her probation.
- H. Respondent shall be responsible for the provision of written reports directly to the Department and the Board from her nursing supervisor (i.e., Director of Nursing) monthly during the first year of her probationary period, and bi-monthly for the second and third years of probation.
  - (1) Employer reports shall include documentation of Respondent's ability to safely and competently practice nursing, and shall be issued to the Board at the address cited in paragraph 3L below.

- I. Respondent shall notify the Board in writing of any change of employment within fifteen (15) days of such change.
- J. Respondent shall notify the Board of any change in her home or business address within fifteen (15) days of such change.
- K. All reports required in paragraphs 3B and 3H are due according to the following schedule:
- (1) Monthly reports are due on the first business day of every month commencing with the reports due May 1, 1994.
  - (2) Bi-monthly reports are due on the first business day of every other month commencing with the reports due May 1, 1995.
- L. All correspondence and reports shall be addressed to:
- Office of the Board of Examiners for Nursing  
Department of Public Health and Addiction Services  
150 Washington Street  
Hartford, CT 06106
- M. Respondent shall not administer or count narcotics or other controlled substances, or have responsibility for such activities in the course of her nursing duties for the first year of the probationary period.

4. Any violation of the terms of this Consent Order without prior written approval by the Board shall constitute grounds for the Board to revoke respondent's nursing license following notice and an opportunity to be heard.
5. Any violation of the terms of this Consent Order shall also constitute grounds for the Department to seek a summary suspension of respondent's license. Respondent specifically waives the provisions of Connecticut General Statutes §4-182(c) and §19a-17(c), which require a finding of an emergency and a clear and immediate danger to the public health and safety, respectively, before summary action can be taken.
6. Any extension of time or grace period for reporting granted by the Board shall not be a waiver or preclude the Board's right to take action at a later time. The Board shall not be required to grant future extensions of time or grace periods.
7. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Licensure and Renewal Section of the Division of Medical Quality Assurance, Department of Public Health and Addiction Services.
8. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.
9. Respondent understands this Consent Order is a matter of public record.

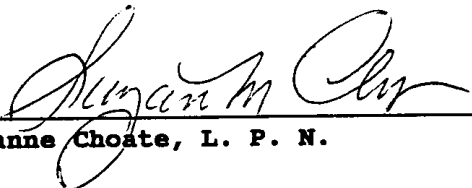
10. Respondent understands this Consent Order may be considered as evidence of the above admitted violations in any proceeding before the Board (1) in which her compliance with this same order is at issue, or (2) in which her compliance with §20-99(b) of the General Statutes of Connecticut, as amended, is at issue.
11. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that she may have under the laws of the State of Connecticut or of the United States.
12. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Board. Respondent understands that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted.
13. Respondent has consulted with an attorney prior to signing this document.

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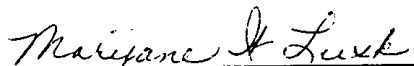
I, Suzanne Choate, L.P.N., have read the above Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

  
Suzanne Choate, L. P. N.

Subscribed and sworn to before me this

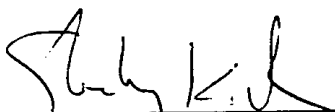
10<sup>th</sup> day of February

<sup>1994</sup>  
1993.

  
Notary Public or person authorized  
by law to administer an oath or  
affirmation

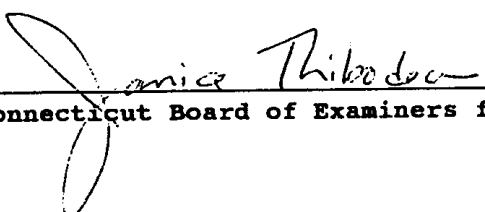
MARIJANE W. LUSK  
NOTARY PUBLIC  
MY COMMISSION EXPIRES APR 30, 1997

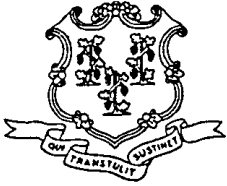
The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health and Addiction Services on the 10<sup>th</sup> day of February 1994, it is hereby accepted.

  
Stanley K. Peck, Director  
Division of Medical Quality Assurance

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the 10 day of March 1994, it is hereby ordered and accepted.

BY:

  
Connecticut Board of Examiners for Nursing



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

April 1, 1997

Suzanne Choate  
17 Deer Run  
Oakdale, CT 06370

RE: Licensed Practical Nurse License No. 010245

Dear Ms. Choate:

Please be advised that the probationary period of your licensed practical nurse license has concluded. The probationary status of your license has been removed with an effective date of April 1, 1997.

Should you have any questions concerning this matter, please contact me at 860-509-7600.

Very truly yours,

A handwritten signature in black ink, appearing to read "Jeffrey A. Kardys", written over a horizontal line.

Jeffrey A. Kardys  
Investigator  
Legal Office - Monitoring & Compliance

JAK:

PROBEND.DOC

cc: Stanley Peck, Director, Legal Office  
Debra Tomassone, HSS, Licensure & Registration



Phone: 860-509-7600 FAX 860-509-7650  
Telephone Device for the Deaf (860) 509-7191  
410 Capitol Avenue - MS # 12 LEG  
P.O. Box 340308 Hartford, CT 06134  
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